

ANNUAL REPORTS TO THE LEGISLATURE

AS OF JUNE 30, 2014



CAL-MORTGAGE LOAN INSURANCE DIVISION

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“Access to Safe, Quality Healthcare Environments that Meet California’s Diverse and Dynamic Needs”

State of California

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ANNUAL REPORT #2

BORROWERS' COMPLIANCE
WITH THEIR
COMMUNITY SERVICE OBLIGATIONS

FOR THE FISCAL YEAR ENDED JUNE 30, 2014

TABLE OF CONTENTS

REASON FOR THE REPORT	1
COMMUNITY SERVICE OBLIGATION STATUS	1
<i>COMPLIANCE ACTIVITY SUMMARY</i>	1
<i>SERVICE AVAILABILITY ASSURANCE REVIEW</i>	2
<i>MEDI-CAL AND MEDICARE PATIENTS ASSURANCE REVIEW</i>	2
<i>HOSPITAL SPECIFIC REQUIREMENTS</i>	3
<i>CONCLUSION</i>	4
EXHIBIT I HEALTH AND SAFETY CODE CITATIONS	5
EXHIBIT II LOANS INSURED DURING FY 2013–2014	7
EXHIBIT III HOSPITALS - COMBINED MEDICARE & MEDI-CAL DATA	8
EXHIBIT IV HOSPITALS - COMBINED MEDICARE & MEDI-CAL UTILIZATION	9
EXHIBIT V SKILLED NURSING FACILITIES - COMBINED MEDICARE & MEDI-CAL DATA	10
EXHIBIT VI PRIMARY CARE CLINICS - COMBINED MEDICARE & MEDI-CAL DATA	11
EXHIBIT VII HOSPITALS - MEDI-CAL DATA	12
EXHIBIT VIII HOSPITALS - MEDI-CAL UTILIZATION	13
EXHIBIT IX SKILLED NURSING FACILITIES - MEDI-CAL DATA	14
EXHIBIT X PRIMARY CARE CLINICS - MEDI-CAL DATA	15
EXHIBIT XI HOSPITALS - MEDICARE DATA	16
EXHIBIT XII HOSPITALS - MEDICARE UTILIZATION	17
EXHIBIT XIII SKILLED NURSING FACILITIES - MEDICARE DATA	18
EXHIBIT XIV PRIMARY CARE CLINICS - MEDICARE DATA	19
EXHIBIT XV HOSPITAL LISTING	20

REASON FOR THE REPORT

As required by Health and Safety Code § 129075(c), the Office of Statewide Health Planning and Development (OSHPD):

“...shall annually report to the Legislature the extent of borrowers' compliance with their community service obligations, pursuant to Section 129050 subdivision (j), Section 129055, and Section 129065.”

The aforementioned sections contain additional criteria for community service obligations as identified below:

- ❖ To be eligible for insurance, the health facility will be available to all persons residing or employed in the area served.
- ❖ If the borrower is a hospital, skilled nursing facility, or primary care clinic, it shall treat a reasonable proportion of Medi-Cal and Medicare patients.
- ❖ To assure availability of services to all persons, every hospital agrees to:
 - Advise patients about Medi-Cal and Medicare eligibility.
 - Distribute a list of physicians who have privileges at the hospital.
 - Advise their medical staff of the hospital's commitment to treat Medi-Cal and Medicare patients.
 - Post notices about their community service obligation.

This is the fifteenth report as required by this statute. For more information regarding Health and Safety Code citations referenced throughout this report, please refer to Exhibit I (page 5).

COMMUNITY SERVICE OBLIGATION STATUS

The community service obligation status describes the following elements:

- ❖ Compliance Activity Summary
- ❖ Service Availability Assurance Review
- ❖ Medi-Cal and Medicare Patients Assurance Review
- ❖ Hospital Specific Requirements
- ❖ Conclusion

COMPLIANCE ACTIVITY SUMMARY

During the Fiscal Year Ended June 30, 2014 (**FYE 2014**), no borrower was determined to be out of compliance with their community service obligations by the Cal-Mortgage Loan Insurance Division, which manages the California Health Facility Construction Loan Insurance Program (**Cal-Mortgage Program**). As a result, no corrective action plans were required as specified in Health and Safety Code § 129075(b). The following tasks further describe the processes required to determine borrower compliance with Health and Safety Code § 129050(j), § 129055, and § 129065, respectively:

- ❖ Review loan applications for eligibility as it pertains to availability of services.
- ❖ Monitor borrowers for provision of services to Medi-Cal and Medicare patients.
- ❖ Assure that hospitals comply with their community service obligations.

SERVICE AVAILABILITY ASSURANCE REVIEW

Cal-Mortgage Program staff review borrowers' compliance with Health and Safety Code § 129050(j). Loan insurance eligibility requires that all borrowers offer reasonable assurance regarding the specified health facility service availability. Services must be available to persons residing or employed in the service area of the borrower.

NEW APPLICANTS

During the reporting period, eight (8) loans were added to the portfolio. Each new borrower provided assurances that its services are available to all persons residing or employed in the area serviced by the project, depending on the medical needs of the patient. Cal-Mortgage Program staff evaluate these assurances during their due diligence review. The results are included in the Project Summary & Feasibility Analysis (**PS&FA**) which are submitted to the Advisory Loan Insurance Committee (**ALIC**) and OSHPD Director. ALIC reviews the PS&FA and borrower materials, then makes recommendations to the OSHPD Director. Lastly, the OSHPD Director reviews the Cal-Mortgage Program and ALIC recommendations before deciding upon each loan insurance request. For additional information regarding new applicants, please refer to Exhibit II (page 7).

CURRENT BORROWERS

Cal-Mortgage Program staff conduct site visits as part of its ongoing project monitoring. During FYE 2014, staff visited 49 sites and no discriminatory practices were observed during these visits. Furthermore, staff maintain contact via periodic meetings with various State agencies such as the Department of Health Care Services and Department of Public Health. Through these valuable partnerships, the staff remains aware of licensing deficiencies and borrower discriminatory practice findings.

MEDI-CAL AND MEDICARE PATIENTS ASSURANCE REVIEW

Hospitals, skilled nursing facilities, and primary care clinics are the facilities which are certified for reimbursement for cost of care under Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code (**Medi-Cal**) and Title XVIII of the Federal Social Security Act (**Medicare**). These types of borrowers must comply with Health and Safety Code § 129055 and demonstrate that the facility is used by persons for whom the cost of care is reimbursed by Medi-Cal and Medicare patients in the community served by the borrower.

NEW APPLICANTS

Among the new loans listed in Exhibit II (page 7), there is one primary care clinic and one hospital. Within the loan insurance application submitted to OSHPD, each borrower provided data about its proportions of Medi-Cal and Medicare utilization. As described in the prior section related to Health and Safety Code § 129050(j), Cal-Mortgage Program staff used the same due diligence to validate the information and the same process was used by ALIC and the OSHPD Director to approve the request for loan insurance.

CURRENT BORROWERS

Among the current borrowers, there are 11 hospitals, 2 skilled nursing facilities, and 23 primary care clinics. The proportion of Medi-Cal and Medicare utilization for each borrower was calculated from OSHPD's Healthcare Information Division data reports. The data was derived from mandatory reports by the healthcare facilities. These utilization percentages were then compared to the percentage of Medi-Cal eligibles and Medicare beneficiaries within each borrower's county. Facility utilization rates demonstrate that borrowers offered a reasonable proportion of services to both Medi-Cal eligibles and Medicare beneficiaries in their respective service areas. For more information regarding Medi-Cal and Medicare utilization rates by facility type, please refer to the following:

- ❖ Exhibits III (page 8), IV (page 9), V (page 10), and VI (page 11) display combined Medi-Cal and Medicare utilization rates for hospitals, skilled nursing facilities, and primary care clinics, respectively.
- ❖ Exhibits VII (page 12), VIII (page 13), IX (page 14), and X (page 15) display Medi-Cal utilization rates for hospitals, skilled nursing facilities, and primary care clinics, respectively.
- ❖ Exhibits XI (page 16), XII (page 17), XIII (page 18), and XIV (page 19) display Medicare utilization rates for hospitals, skilled nursing facilities, and primary care clinics, respectively.

Below are several explanations regarding group variances:

- ❖ For skilled nursing facilities, Medicare benefits include a 100-day limit during a benefit period, available only after a 3-day inpatient hospital stay. The first 20 days are fully covered while the remaining 80 days are partially covered and the beneficiary must pay a coinsurance daily rate. This affects the Medicare utilization rate and, as a result, some insured skilled nursing facilities show low levels of Medicare utilization.
- ❖ Some primary care clinics provide services focused on Medi-Cal and uninsured populations. These services include immunizations, pediatrics, prenatal, and well-baby visits which are primary care focused. Elderly Medicare patients generally need specialty medical services and utilize community physicians. As a result, these clinics have a low level of Medicare utilization.

HOSPITAL SPECIFIC REQUIREMENTS

Health and Safety Code § 129065 states that each of the 11 general acute care hospitals in the portfolio, shown in Exhibit XV (page 20), must perform the following tasks as statutorily mandated:

- ❖ Advise patients about Medi-Cal and Medicare eligibility.
- ❖ Distribute a list of physicians who have privileges at the hospital.
- ❖ Advise its medical staff of the hospital's commitment to treat Medi-Cal and Medicare patients.
- ❖ Post notices about its community service obligation.

During site visits, Cal-Mortgage Program staff validate whether or not the facility complied with Health and Safety Code § 129065.

CONCLUSION

With reference to Health and Safety Code § 129050(j), all applicants for new loans in FYE 2014 made reasonable assurances that their services are available to all persons in their respective service areas based on the medical needs of the patients. It was determined that all currently insured borrowers met their obligation to be available to all persons in their service areas.

With reference to Health and Safety Code § 129055, hospitals, skilled nursing facilities, and primary care clinics are the borrowers in the portfolio that provide services to Medi-Cal eligibles and Medicare beneficiaries. A review of utilization of services at each hospital, skilled nursing facility, and primary care clinic demonstrated that the borrower was providing a reasonable proportion of services to Medi-Cal eligibles and Medicare beneficiaries in the service area.

With reference to Health and Safety Code § 129065, all hospitals in the portfolio provided proper notifications to their patients and medical staff relating to their community service obligation requirements.

Based upon this review, no borrower was determined to be out of compliance with their community service obligations.

Exhibit I

HEALTH AND SAFETY CODE CITATIONS

SECTION 129045

The office shall annually report to the Legislature the financial status of the program and its insured portfolio, including the status of all borrowers in each stage of default and the office's efforts to collect from borrowers that have defaulted on their debt service payments.

SECTION 129050

A loan shall be eligible for insurance under this chapter if all of the following conditions are met:

- (j) The borrower shall offer reasonable assurance that the services of the health facility will be made available to all persons residing or employed in the area served by the facility.

SECTION 129055

In order to comply with subdivision (j) of Section 129050, any borrower that is certified for reimbursement for cost of care under Chapter 7 (commencing with Section 14000) of Part 3 of Division 9 of the Welfare and Institutions Code shall demonstrate that its facility is used by persons for whom the cost of care is reimbursed under that chapter, in a proportion that is reasonable based upon the proportion of Medi-Cal patients in the community served by the borrower and by persons for whom the costs of care is reimbursed under Title XVIII of the federal Social Security Act in a proportion that is reasonable based upon the proportion of Medicare patients in the community served by the borrower.

For the purposes of this chapter, the community means the service areas or patient populations for which the health facility provides health care services, unless the office determines that, or the borrower demonstrates to the satisfaction of the office that, a different definition is more appropriate for the borrower's facility.

SECTION 129065

As part of its assurance under subdivision (j) of Section 129050, any borrower that is a general acute care hospital or acute psychiatric hospital shall agree to the following actions:

- (a) To advise each person seeking services at the borrower's facility as to the person's potential eligibility for Medi-Cal and Medicare benefits or benefits from other governmental third party payers.
- (b) To make available to the office and to any interested person a list of physicians with staff privileges at the borrower's facility, that includes:
 - (1) Name
 - (2) Specialty
 - (3) Language spoken
 - (4) Whether takes Medi-Cal and Medicare patients
 - (5) Business address and phone number

Health and Safety Code Citations, *continued*

- (c) To inform in writing on a periodic basis all practitioners of the healing arts having staff privileges in the borrower's facility as to the existence of the facility's community service obligation. The required notice to practitioners shall contain a statement, as follows:

"This hospital has agreed to provide a community service and to accept Medi-Cal and Medicare patients. The administration and enforcement of this agreement is the responsibility of the Office of Statewide Health Planning and Development and this facility."

- (d) To post notices in the following form, that shall be multilingual where the borrower serves a multilingual community, in appropriate areas within the facility, including but not limited to, admissions offices, emergency rooms, and business offices:

NOTICE OF COMMUNITY SERVICE OBLIGATION

"This facility has agreed to make its services available to all persons residing or employed in this area. This facility is prohibited by law from discriminating against Medi-Cal and Medicare patients. Should you believe you may be eligible for Medi-Cal or Medicare, you should contact our business office (or designated person or office) for assistance in applying. You should also contact our business office (or designated person or office) if you are in need of a physician to provide you with services at this facility. If you believe that you have been refused services at this facility in violation of the community service obligation you should inform (designated person or office) and the Office of Statewide Health Planning and Development."

The borrower shall provide copies of this notice for posting to all welfare offices in the county where the borrower's facility is located.

SECTION 129075

- (a) Each borrower shall provide any reports as may be required of it by Part 5 (commencing with Section 128675), from which the office shall determine the borrower's compliance with subdivision (j) of Section 129050.
- (b) If a report indicates noncompliance with subdivision (j) of Section 129050, Section 129055, or Section 129065, the office shall require the borrower to submit a plan detailing the steps and timetables the borrower will take to bring the facility into compliance.
- (c) The office shall annually report to the Legislature the extent of the borrowers' compliance with their community service obligations pursuant to subdivision (j) of Section 129050, Section 129055, and Section 129065.

Exhibit II

Loans Insured During FY 2013–2014

(Sorted by Date Loan Insured)

Borrower Name	Facility City	Facility Type	Date Loan Insured	Insured Loan Amount	Loan Type
Poway R H F Housing, Inc.	Poway	MULTI-OTH	11/07/2013	\$ 13,345,000	Refinance
Mayers Memorial Hospital District - LOC	Fall River Mills	HOSP-DIST	11/13/2013	\$ 500,000	Line of Credit
Community Church Retirement Center	Mill Valley	MULTI-OTH	11/26/2013	\$ 29,970,000	Refinance plus ¹
Los Angeles Jewish Home for the Aging	Los Angeles	MULTI-OTH	12/20/2013	\$ 71,155,000	Refinance
St. John's Well Child and Family Center - LOC	Los Angeles	CLINIC-PC	01/14/2014	\$ 700,000	Line of Credit
Southern California Development Corporation of VOA, Inc.	National City	CDRF	02/10/2014	\$ 500,000	New
Institute on Aging - LOC	San Francisco	MULTI-OTH	03/24/2014	\$ 3,000,000	Line of Credit
Montecedro	Pasadena	MULTI-CCRC	06/12/2014	\$ 140,305,000	New
Total Loans Insured	8			\$ 259,475,000	

Footnotes:

¹ Refinanced an existing loan plus received an additional loan.

Facility Type		Facility Type	
ADC-DD	Adult Day Care: Developmentally Disabled	GH-MD	Group Home: Mentally Disabled or Emotionally Disabled
ADHC	Adult Day Health Care	HOSP	Hospital: General Acute Care
CDRF	Chemical Dependency Recovery Facility	HOSP-DIST	Hospital: District
CLINIC-AIDS	Clinic: AIDS	HOSP-PSYCH	Hospital: Psychiatric
CLINIC-MH	Clinic: Mental Health	HOSPICE	Hospice
CLINIC-MULTI	Clinic: Multi-Specialty and Diagnostic Facility	MULTI-CCRC	Multi-Level: Continuing Care Retirement Community
CLINIC-PC	Clinic: Primary Care	MULTI-OTH	Multi-Level: Other (Month-to-Month)
GH-DD	Group Home: Developmentally Disabled	SNF	Skilled Nursing Facility
GH-DD/MD	Group Home: Developmentally Disabled and Mentally Disabled or Emotionally Disabled		

Hospitals
 Combined Medicare and Medi-Cal Services Provided
 Compared to
 Medicare Beneficiaries and Medi-Cal Eligibles within Applicable County

Facility Name	Combined Medicare & Medi-Cal Services Provided ¹				Medicare Beneficiaries ² & Medi-Cal Eligibles ³	
	Patient Days	Discharges	O/P Visits	Gross Revenue	County	Percent
Chinese Hospital	95%	93%	66%	74%	San Francisco	32%
El Centro Regional Medical Center	79%	72%	71%	72%	Imperial	45%
Enloe Medical Center	75%	70%	59%	67%	Butte	42%
Hazel Hawkins Memorial Hospital	90%	69%	61%	64%	San Benito	28%
Kern Valley Healthcare District	94%	90%	70%	82%	Kern	38%
Lodi Memorial Hospital Association, Inc.	81%	77%	68%	74%	San Joaquin	37%
Lompoc District Hospital	82%	67%	60%	65%	Santa Barbara	32%
Marshall Medical Center	77%	75%	61%	66%	El Dorado	28%
Mayers Memorial Hospital District	90%	74%	72%	77%	Shasta	44%
Mendocino Coast Health Care District	82%	78%	81%	73%	Mendocino	46%
St. Rose Hospital	87%	87%	56%	80%	Alameda	29%

Footnotes:

¹ Percentage of Combined Medicare & Medi-Cal Services Provided from the Combined Medicare & Medi-Cal Utilization Worksheet; refer to Exhibit IV.

² Beneficiary data from Centers for Medicare & Medicaid Services website (<http://www.cms.gov>): MA State/County Penetration as of January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

³ Department of Health Care Services, Research & Analytics Studies Section, Medi-Cal Beneficiary Profiles by County, January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

Exhibit IV

Hospitals

Combined Medicare and Medi-Cal Utilization

Facility Name	Patient Days ^{1, 3, 4}			Discharges ^{1, 3, 4}			Outpatient Visits ^{1, 3, 4}			Gross Revenue ^{1, 2, 3, 4}		
	Combined	Total	Percent	Combined	Total	Percent	Combined	Total	Percent	Combined	Total	Percent
Chinese Hospital	10,653	11,255	95%	1,776	1,902	93%	44,821	68,392	66%	\$ 163,329,736	\$ 221,483,692	74%
El Centro Regional Medical Center	19,109	24,339	79%	4,545	6,347	72%	134,094	188,383	71%	\$ 431,558,220	\$ 596,995,714	72%
Enloe Medical Center	50,314	66,646	75%	10,239	14,582	70%	209,638	357,737	59%	\$ 1,056,966,245	\$ 1,573,775,544	67%
Hazel Hawkins Memorial Hospital	38,179	42,407	90%	1,727	2,519	69%	81,874	133,473	61%	\$ 157,686,152	\$ 247,965,801	64%
Kern Valley Healthcare District	21,190	22,615	94%	821	917	90%	13,544	19,311	70%	\$ 53,519,343	\$ 65,510,797	82%
Lodi Memorial Hospital Association, Inc.	26,051	32,216	81%	5,077	6,600	77%	136,818	201,098	68%	\$ 867,081,924	\$ 1,174,974,730	74%
Lompoc District Hospital	37,253	45,687	82%	1,776	2,642	67%	38,207	63,772	60%	\$ 68,937,244	\$ 105,651,778	65%
Marshall Medical Center	18,654	24,186	77%	4,173	5,542	75%	253,332	417,953	61%	\$ 595,941,281	\$ 901,057,382	66%
Mayers Memorial Hospital District	26,231	29,150	90%	393	528	74%	13,099	18,102	72%	\$ 24,427,157	\$ 31,580,033	77%
Mendocino Coast Health Care District	4,326	5,276	82%	960	1,233	78%	35,065	43,286	81%	\$ 70,822,451	\$ 96,630,338	73%
St. Rose Hospital	23,804	27,371	87%	5,378	6,153	87%	22,668	40,577	56%	\$ 542,472,730	\$ 677,979,874	80%

Footnotes:

¹ Data from OSHPD website (<http://www.oshpd.ca.gov/HID/Products/Hospitals/AnnFinanData/PivotProfiles/default.asp>). File: 2013 OSHPD Hospital Annual Financial Data Profile (HAFD2013pivot.xls). Percentages were calculated from the file data.

² Inpatient and outpatient gross revenue data were combined from the above source.

³ Combined column reflects aggregate Medicare and Medi-Cal data within each facility. Total column refers to Total Patient Days, Discharges, Outpatient Visits, and Gross Revenue reported from all payer sources.

⁴ Combined and Total columns reflect all types of care provided by each facility which may include general acute, psychiatric, rehabilitation, and long-term care.

Skilled Nursing Facilities
 Combined Medicare and Medi-Cal Services Provided
 Compared to
 Medicare Beneficiaries and Medi-Cal Eligibles within Applicable County

Facility Name	Gross Revenue¹			Medicare Beneficiaries² & Medi-Cal Eligibles³	
	Combined	Total	Percent	County	Percent
Asian Community Skilled Nursing Facility	\$ 8,738,015	\$ 11,076,605	79%	Sacramento	36%
North Kern - South Tulare Hospital District	\$ 12,111,051	\$ 12,496,815	97%	Kern	38%

Footnotes:

¹ Data from OSHPD website (<http://oshpd.ca.gov/HID/Products/LTC/AnnFinanclData/PivotProfls/default.asp>). File: 2013 LTC Facilities Annual Financial Pivot Profile (LTCFinancialPivot2013.zip).

² Beneficiary data from Centers for Medicare & Medicaid Services website (<http://www.cms.gov>): MA State/County Penetration as of January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014.).

³ Department of Health Care Services, Research & Analytics Studies Section, Medi-Cal Beneficiary Profiles by County, January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

Exhibit VI

Primary Care Clinics

Combined Medicare and Medi-Cal Services Provided

Compared to

Medicare Beneficiaries and Medi-Cal Eligibles within Applicable County

Borrower Name	Facility Name	Gross Revenue ^{1,2}			Medicare Beneficiaries ³ & Medi-Cal Eligibles ⁴	
		Combined	Total	Percent	County	Percent
AltaMed Health Services	AltaMed Medical Group - E.L.A./Whittier	\$ 17,573,976	\$ 30,854,639	57%	Los Angeles	35%
Asian Health Services, Inc.	Asian Health Service	\$ 6,695,540	\$ 10,356,139	65%	Alameda	29%
Centro de Salud de la Comunidad de San Ysidro (5 sites)	Chula Vista Family Clinic	\$ 2,768,248	\$ 4,011,106	69%	San Diego	28%
	King-Chavez Health Center	\$ 9,668,341	\$ 11,621,364	83%	San Diego	28%
	Otay Family Health Clinic	\$ 2,924,844	\$ 4,192,896	70%	San Diego	28%
	Paradise Hills Family Clinic	\$ 3,728,236	\$ 4,288,434	87%	San Diego	28%
	South Bay Family Health Center	\$ 1,882,767	\$ 2,438,974	77%	San Diego	28%
Clinicas del Camino Real, Inc. (2 sites)	Clinicas del Camino Real, Oxnard	\$ 3,176,532	\$ 6,126,357	52%	Ventura	28%
	Clinicas del Camino Real, Ventura	\$ 2,029,381	\$ 5,106,193	40%	Ventura	28%
Community Health Centers of the Central Coast, Inc.	Nipomo Community Medical Center	\$ 3,306,645	\$ 6,431,791	51%	San Luis Obispo	30%
Community Health Systems, Inc.	Bloomington Community Health Center	\$ 1,210,675	\$ 2,654,206	46%	San Bernardino	35%
Community Medical Center, Inc.	Channel Medical Center	\$ 7,350,355	\$ 11,425,037	64%	San Joaquin	37%
	Orland Family Health Center	\$ 809,325	\$ 1,636,197	49%	Glenn	42%
	Chico Family Health Center	\$ 3,048,234	\$ 4,800,667	63%	Butte	42%
	Gridley Family Health Center	\$ 489,650	\$ 986,534	50%	Butte	42%
	Oroville Family Health Center	\$ 3,339,878	\$ 5,197,681	64%	Butte	42%
Family HealthCare Network	Family HealthCare Network	\$ 15,426,341	\$ 23,198,812	66%	Tulare	47%
Golden Valley Health Centers	Golden Valley Health Center - West Childs	\$ 8,473,438	\$ 11,741,733	72%	Merced	42%
Hill Country Community Clinic	Hill Country Community Clinic	\$ 1,535,725	\$ 3,276,923	47%	Shasta	44%
La Maestra Family Clinic, Inc.	La Maestra Family Clinic - Fairmont	\$ 11,151,140	\$ 18,805,516	59%	San Diego	28%
Lifelong Medical Care, Inc.	Over 60 Health Center	\$ 4,247,800	\$ 4,669,386	91%	Alameda	29%
Mountain Valley Health Centers (2 sites)	Big Valley Medical Center	\$ 573,278	\$ 1,351,140	42%	Lassen	27%
	Butte Valley Health Center	\$ 439,426	\$ 945,207	46%	Siskiyou	48%
Native American Health Center, Inc.	East Bay Native American Health Center	\$ 6,407,227	\$ 9,176,328	70%	Alameda	29%
Petaluma Health Center	Petaluma Health Center	\$ 5,740,700	\$ 13,106,750	44%	Sonoma	30%
Salud Para La Gente	Salud Para La Gente	\$ 10,735,617	\$ 17,320,583	62%	Santa Cruz	29%
Santa Rosa Community Health Centers	Southwest Community Health Center	\$ 5,747,435	\$ 9,819,609	59%	Sonoma	30%
St. John's Well Child and Family Center ⁵	St. John's Well Child and Family Center - Dr. Louis	\$ 49,286	\$ 65,426	75%	Los Angeles	35%
United Health Center of the San Joaquin Valley (3 sites)	United Health Centers of SJV - Kerman	\$ 3,736,938	\$ 5,771,597	65%	Fresno	44%
	United Health Centers of SJV - Mendota	\$ 4,726,576	\$ 6,821,288	69%	Fresno	44%
	United Health Centers of SJV - Parlier	\$ 3,297,581	\$ 7,325,934	45%	Fresno	44%
Valley Community Clinic	Valley Community Clinic	\$ 2,989,784	\$ 11,474,386	26%	Los Angeles	35%
Valley Health Team, Inc.	San Joaquin Health Center	\$ 2,092,535	\$ 3,453,096	61%	Fresno	44%
West Oakland Health Council, Inc.	East Oakland Health Center	\$ 351,195	\$ 1,944,272	18%	Alameda	29%

Footnotes:

¹ Data from OSHPD website (http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/PC_SC_Utilization.html). File: 2013 Primary Care Clinic Annual Utilization Report (PCC_Utilization_Pivot13.xlsx). Percentages were calculated from the file data.

² Combined column reflects aggregate Medicare and Medi-Cal data within each facility. Total column refers to Gross Revenue reported from all payer sources.

³ Beneficiary data from Centers for Medicare & Medicaid Services website (<http://www.cms.gov>): MA State/County Penetration as of January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

⁴ Department of Health Care Services, Research & Analytics Studies Section, Medi-Cal Beneficiary Profiles by County, January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

⁵ The St. John's Well Child and Family Center facility was under construction during the 2013 data report year, therefore, gross revenues listed are significantly below normal. Normal operations continue in the 2014 data report year.

Hospitals
 Medi-Cal Services Provided
 Compared to
 Medi-Cal Eligibles within Applicable County

Facility Name	Medi-Cal Services Provided¹				Medi-Cal Eligibles²	
	Patient Days	Discharges	O/P Visits	Gross Revenue	County	Percent
Chinese Hospital	8%	9%	14%	9%	San Francisco	16%
El Centro Regional Medical Center	30%	30%	40%	32%	Imperial	31%
Enloe Medical Center	16%	18%	18%	16%	Butte	22%
Hazel Hawkins Memorial Hospital	67%	29%	36%	26%	San Benito	16%
Kern Valley Healthcare District	80%	32%	28%	40%	Kern	26%
Lodi Memorial Hospital Association, Inc.	23%	25%	34%	22%	San Joaquin	24%
Lompoc District Hospital	64%	23%	22%	26%	Santa Barbara	17%
Marshall Medical Center	8%	9%	12%	13%	El Dorado	10%
Mayers Memorial Hospital District	85%	23%	18%	21%	Shasta	21%
Mendocino Coast Health Care District	16%	20%	19%	16%	Mendocino	25%
St. Rose Hospital	29%	30%	37%	34%	Alameda	16%

Footnotes:

¹ Medi-Cal Services Provided from the Medi-Cal Utilization Worksheet; refer to Exhibit VIII.

² Department of Health Care Services, Research & Analytic Studies Section, Medi-Cal Beneficiary Counts by County, January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

Exhibit VIII

Hospitals Medi-Cal Utilization

Facility Name	Patient Days ^{1,3,4}			Discharges ^{1,3,4}			Outpatient Visits ^{1,3,4}			Gross Revenue ^{1,2,3,4}		
	Medi-Cal	Total	Percent	Medi-Cal	Total	Percent	Medi-Cal	Total	Percent	Medi-Cal	Total	Percent
Chinese Hospital	907	11,255	8%	173	1,902	9%	9,829	68,392	14%	\$ 20,033,265	\$ 221,483,692	9%
El Centro Regional Medical Center	7,323	24,339	30%	1,874	6,347	30%	75,215	188,383	40%	\$ 192,978,445	\$ 596,995,714	32%
Enloe Medical Center	10,681	66,646	16%	2,684	14,582	18%	62,991	357,737	18%	\$ 253,289,448	\$ 1,573,775,544	16%
Hazel Hawkins Memorial Hospital	28,304	42,407	67%	723	2,519	29%	47,846	133,473	36%	\$ 64,028,140	\$ 247,965,801	26%
Kern Valley Healthcare District	18,156	22,615	80%	293	917	32%	5,354	19,311	28%	\$ 26,168,925	\$ 65,510,797	40%
Lodi Memorial Hospital Association, Inc.	7,262	32,216	23%	1,673	6,600	25%	69,345	201,098	34%	\$ 264,337,415	\$ 1,174,974,730	22%
Lompoc District Hospital	29,441	45,687	64%	616	2,642	23%	13,941	63,772	22%	\$ 27,337,945	\$ 105,651,778	26%
Marshall Medical Center	2,018	24,186	8%	512	5,542	9%	50,885	417,953	12%	\$ 113,425,791	\$ 901,057,382	13%
Mayers Memorial Hospital District	24,641	29,150	85%	119	528	23%	3,173	18,102	18%	\$ 6,780,208	\$ 31,580,033	21%
Mendocino Coast Health Care District	819	5,276	16%	244	1,233	20%	8,037	43,286	19%	\$ 15,151,465	\$ 96,630,338	16%
St. Rose Hospital	8,017	27,371	29%	1,829	6,153	30%	14,904	40,577	37%	\$ 229,225,454	\$ 677,979,874	34%

Footnotes:

¹ Data from OSHPD website (<http://www.oshpd.ca.gov/HID/Products/Hospitals/AnnFinanData/PivotProfles/default.asp>). File: 2013 OSHPD Hospital Annual Financial Data Profile (HAFD2013pivot.xls). Percentages were calculated from the file data.

² Inpatient and outpatient gross revenue data were combined from the above source.

³ Total column refers to Total Patient Days, Discharges, Outpatient Visits, and Gross Revenue reported from all payer sources.

⁴ Medi-Cal and Total columns reflect all types of care provided by each facility which may include general acute, psychiatric, rehabilitation, and long-term care.

Skilled Nursing Facilities

Medi-Cal Services Provided Compared to Medi-Cal Eligibles within Applicable County

Facility Name	Gross Revenue ¹			Medi-Cal Eligibles ²	
	Medi-Cal	Total	Percent	County	Percent
Asian Community Skilled Nursing Facility	\$ 4,516,937	\$ 11,076,605	41%	Sacramento	21%
North Kern - South Tulare Hospital District	\$ 10,576,087	\$ 12,496,815	85%	Kern	26%

Footnotes:

¹ Data from OSHPD website (<http://oshpd.ca.gov/HID/Products/LTC/AnnFinanclData/PivotProfls/default.asp>). File: 2013 LTC Facilities Annual Financial Pivot Profile (LTCFinancialPivot2013.zip).

² Department of Health Care Services, Research & Analytics Studies Section, Medi-Cal Beneficiary Profiles by County, January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

Exhibit X

Primary Care Clinics

Medi-Cal Services Provided Compared to Medi-Cal Eligibles within Applicable County

Borrower Name	Facility Name	Gross Revenue ^{1,2}			Medi-Cal Eligibles ³	
		Medi-Cal	Total	Percent	County	Percent
AltaMed Health Services	AltaMed Medical Group - E.L.A./Whittier	\$ 14,964,907	\$ 30,854,639	49%	Los Angeles	23%
Asian Health Services, Inc.	Asian Health Service	\$ 4,834,357	\$ 10,356,139	47%	Alameda	16%
Centro de Salud de la Comunidad de San Ysidro (5 sites)	Chula Vista Family Clinic	\$ 2,430,465	\$ 4,011,106	61%	San Diego	14%
	King-Chavez Health Center	\$ 9,334,151	\$ 11,621,364	80%	San Diego	14%
	Otay Family Health Clinic	\$ 2,707,411	\$ 4,192,896	65%	San Diego	14%
	Paradise Hills Family Clinic	\$ 3,510,803	\$ 4,288,434	82%	San Diego	14%
	South Bay Family Health Center	\$ 1,818,024	\$ 2,438,974	75%	San Diego	14%
Clinicas del Camino Real, Inc. (2 sites)	Clinicas del Camino Real, Oxnard	\$ 2,811,023	\$ 6,126,357	46%	Ventura	13%
	Clinicas del Camino Real, Ventura	\$ 1,762,855	\$ 5,106,193	35%	Ventura	13%
Community Health Centers of the Central Coast, Inc.	Nipomo Community Medical Center	\$ 2,671,745	\$ 6,431,791	42%	San Luis Obispo	11%
Community Health Systems, Inc.	Bloomington Community Health Center	\$ 1,120,001	\$ 2,654,206	42%	San Bernardino	23%
Community Medical Center, Inc.	Channel Medical Center	\$ 6,449,884	\$ 11,425,037	56%	San Joaquin	24%
	Orland Family Health Center	\$ 699,668	\$ 1,636,197	43%	Glenn	24%
	Chico Family Health Center	\$ 1,834,340	\$ 4,800,667	38%	Butte	22%
	Gridley Family Health Center	\$ 353,341	\$ 986,534	36%	Butte	22%
	Oroville Family Health Center	\$ 2,349,039	\$ 5,197,681	45%	Butte	22%
Del Norte Clinics, Inc. - Ampla Health (4 sites)	Family HealthCare Network	\$ 14,064,907	\$ 23,198,812	61%	Tulare	35%
	Golden Valley Health Centers	\$ 7,046,207	\$ 11,741,733	60%	Merced	31%
	Hill Country Community Clinic	\$ 1,029,613	\$ 3,276,923	31%	Shasta	21%
	La Maestra Family Clinic, Inc.	\$ 10,455,125	\$ 18,805,516	56%	San Diego	14%
Lifelong Medical Care, Inc.	Over 60 Health Center	\$ 630,600	\$ 4,669,386	14%	Alameda	16%
	Big Valley Medical Center	\$ 240,408	\$ 1,351,140	18%	Lassen	13%
	Butte Valley Health Center	\$ 361,611	\$ 945,207	38%	Siskiyou	22%
Native American Health Center, Inc.	East Bay Native American Health Center	\$ 6,185,463	\$ 9,176,328	67%	Alameda	16%
Petaluma Health Center	Petaluma Health Center	\$ 4,154,404	\$ 13,106,750	32%	Sonoma	12%
Salud Para La Gente	Salud Para La Gente	\$ 10,442,755	\$ 17,320,583	60%	Santa Cruz	14%
Santa Rosa Community Health Centers	Southwest Community Health Centers	\$ 5,381,342	\$ 9,819,609	55%	Sonoma	12%
St. John's Well Child and Family Center ⁴	St. John's Well Child and Family Center - Dr. Louis	\$ 49,286	\$ 65,426	75%	Los Angeles	23%
United Health Center of the San Joaquin Valley (3 sites)	United Health Centers of SJV - Kerman	\$ 3,551,767	\$ 5,771,597	62%	Fresno	31%
	United Health Centers of SJV - Mendota	\$ 4,636,216	\$ 6,821,288	68%	Fresno	31%
	United Health Centers of SJV - Parlier	\$ 3,028,937	\$ 7,325,934	41%	Fresno	31%
Valley Community Clinic	Valley Community Clinic	\$ 2,725,297	\$ 11,474,386	24%	Los Angeles	23%
Valley Health Team, Inc.	San Joaquin Health Center	\$ 1,870,686	\$ 3,453,096	54%	Fresno	31%
West Oakland Health Council, Inc.	East Oakland Health Center	\$ 274,372	\$ 1,944,272	14%	Alameda	16%

Footnotes:

¹ Data from OSHPD website (http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/PC_SC_Utilization.html). File: 2013 Primary Care Clinic Annual Utilization Report (PCC_Utilization_Pivot13.xlsm). Percentages were calculated from the file data.

² Total column refers to Gross Revenue reported from all payer sources.

³ Department of Health Care Services, Research & Analytics Studies Section, Medi-Cal Beneficiary Profiles by County, January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

⁴ The St. John's Well Child and Family Center facility was under construction during the 2013 data report year, therefore, gross revenues listed are significantly below normal. Normal operations continue in the 2014 data report year.

Hospitals

Medicare Services Provided Compared to Medicare Beneficiaries within Applicable County

Facility Name	Medicare Services Provided ¹				Medicare Beneficiaries ²	
	Patient Days	Discharges	O/P Visits	Gross Revenue	County	Percent
Chinese Hospital	87%	84%	51%	65%	San Francisco	16%
El Centro Regional Medical Center	48%	42%	31%	40%	Imperial	14%
Enloe Medical Center	59%	52%	41%	51%	Butte	20%
Hazel Hawkins Memorial Hospital	23%	40%	25%	38%	San Benito	12%
Kern Valley Healthcare District	13%	58%	42%	42%	Kern	12%
Lodi Memorial Hospital Association, Inc.	58%	52%	34%	51%	San Joaquin	13%
Lompoc District Hospital	17%	44%	38%	39%	Santa Barbara	15%
Marshall Medical Center	69%	66%	48%	54%	El Dorado	19%
Mayers Memorial Hospital District	5%	52%	55%	56%	Shasta	24%
Mendocino Coast Health Care District	66%	58%	62%	58%	Mendocino	22%
St. Rose Hospital	58%	58%	19%	46%	Alameda	13%

Footnotes:

¹ Medicare Services Provided from the Medicare Utilization Worksheet; refer to Exhibit XII.

² Beneficiary data from Centers for Medicare & Medicaid Services website (<http://www.cms.gov>): MA State/County Penetration as of January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

Exhibit XII

Hospitals Medicare Utilization

Facility Name	Patient Days ^{1,3,4}			Discharges ^{1,3,4}			Outpatient Visits ^{1,3,4}			Gross Revenue ^{1,2,3,4}		
	Medicare	Total	Percent	Medicare	Total	Percent	Medicare	Total	Percent	Medicare	Total	Percent
Chinese Hospital	9,746	11,255	87%	1,603	1,902	84%	34,992	68,392	51%	\$143,296,471	\$ 221,483,692	65%
El Centro Regional Medical Center	11,786	24,339	48%	2,671	6,347	42%	58,879	188,383	31%	\$238,579,775	\$ 596,995,714	40%
Enloe Medical Center	39,633	66,646	59%	7,555	14,582	52%	146,647	357,737	41%	\$803,676,797	\$ 1,573,775,544	51%
Hazel Hawkins Memorial Hospital	9,875	42,407	23%	1,004	2,519	40%	34,028	133,473	25%	\$ 93,658,012	\$ 247,965,801	38%
Kern Valley Healthcare District	3,034	22,615	13%	528	917	58%	8,190	19,311	42%	\$ 27,350,418	\$ 65,510,797	42%
Lodi Memorial Hospital Association, Inc.	18,789	32,216	58%	3,404	6,600	52%	67,473	201,098	34%	\$602,744,509	\$ 1,174,974,730	51%
Lompoc District Hospital	7,812	45,687	17%	1,160	2,642	44%	24,266	63,772	38%	\$ 41,599,299	\$ 105,651,778	39%
Marshall Medical Center	16,636	24,186	69%	3,661	5,542	66%	202,447	417,953	48%	\$482,515,490	\$ 901,057,382	54%
Mayers Memorial Hospital District	1,590	29,150	5%	274	528	52%	9,926	18,102	55%	\$ 17,646,949	\$ 31,580,033	56%
Mendocino Coast Health Care District	3,507	5,276	66%	716	1,233	58%	27,028	43,286	62%	\$ 55,670,986	\$ 96,630,338	58%
St. Rose Hospital	15,787	27,371	58%	3,549	6,153	58%	7,764	40,577	19%	\$313,247,276	\$ 677,979,874	46%

Footnotes:

¹ Data from OSHPD website (<http://www.oshpd.ca.gov/HID/Products/Hospitals/AnnFinanData/PivotProfles/default.asp>). File: 2013 OSHPD Hospital Annual Financial Data Profile (HAFD2013pivot.xls). Percentages were calculated from the file data.

² Inpatient and outpatient gross revenue data were combined from the above source.

³ Total column refers to Total Patient Days, Discharges, Outpatient Visits, and Gross Revenue reported from all payer sources.

⁴ Medicare and Total columns reflect all types of care provided by each facility which may include general acute, psychiatric, rehabilitation, and long-term care.

Skilled Nursing Facilities

Medicare Services Provided Compared to Medicare Beneficiaries within Applicable County

Facility Name	Gross Revenue ¹			Medicare Beneficiaries ²	
	Medicare	Total	Percent	County	Percent
Asian Community Skilled Nursing Facility	\$ 4,221,078	\$ 11,076,605	38%	Sacramento	14%
North Kern - South Tulare Hospital District	\$ 1,534,964	\$ 12,496,815	12%	Kern	12%

Footnotes:

¹ Data from OSHPD website (<http://oshpd.ca.gov/HID/Products/LTC/AnnFinanclData/PivotProfls/default.asp>). File: 2013 LTC Facilities Annual Financial Pivot Profile (LTCFinancialPivot2013.zip).

² Beneficiary data from Centers for Medicare & Medicaid Services website (<http://www.cms.gov>): MA State/County Penetration as of January 2013. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2014).

Exhibit XIV

Primary Care Clinics

Medicare Services Provided Compared to Medicare Beneficiaries within Applicable County

Borrower Name	Facility Name	Gross Revenue ^{1,2}			Medicare Beneficiaries ³	
		Medicare	Total	Percent	County	Percent
AltaMed Health Services	AltaMed Medical Group - E.L.A./Whittier	\$ 2,609,069	\$ 30,854,639	8%	Los Angeles	13%
Asian Health Services, Inc.	Asian Health Service	\$ 1,861,183	\$ 10,356,139	18%	Alameda	13%
Centro de Salud de la Comunidad de San Ysidro (5 sites)	Chula Vista Family Clinic	\$ 337,783	\$ 4,011,106	8%	San Diego	14%
	King-Chavez Health Center	\$ 334,190	\$ 11,621,364	3%	San Diego	14%
	Otay Family Health Clinic	\$ 217,433	\$ 4,192,896	5%	San Diego	14%
	Paradise Hills Family Clinic	\$ 217,433	\$ 4,288,434	5%	San Diego	14%
	South Bay Family Health Center	\$ 64,743	\$ 2,438,974	3%	San Diego	14%
Clinicas del Camino Real, Inc. (2 sites)	Clinicas del Camino Real, Oxnard	\$ 365,509	\$ 6,126,357	6%	Ventura	14%
	Clinicas del Camino Real, Ventura	\$ 266,526	\$ 5,106,193	5%	Ventura	14%
Community Health Centers of the Central Coast, Inc.	Nipomo Community Medical Center	\$ 634,900	\$ 6,431,791	10%	San Luis Obispo	18%
Community Health Systems, Inc.	Bloomington Community Health Center	\$ 90,674	\$ 2,654,206	3%	San Bernardino	11%
Community Medical Center, Inc.	Channel Medical Center	\$ 900,471	\$ 11,425,037	8%	San Joaquin	13%
	Orland Family Health Center	\$ 109,657	\$ 1,636,197	7%	Glenn	18%
Del Norte Clinics, Inc. - Ampla Health (4 sites)	Chico Family Health Center	\$ 1,213,894	\$ 4,800,667	25%	Butte	20%
	Gridley Family Health Center	\$ 136,309	\$ 986,534	14%	Butte	20%
	Oroville Family Health Center	\$ 990,839	\$ 5,197,681	19%	Butte	20%
	Family HealthCare Network	\$ 1,361,434	\$ 23,198,812	6%	Tulare	12%
Golden Valley Health Centers	Golden Valley Health Center - West Childs	\$ 1,427,231	\$ 11,741,733	12%	Merced	12%
Hill Country Community Clinic	Hill Country Community Clinic	\$ 506,112	\$ 3,276,923	15%	Shasta	24%
La Maestra Family Clinic, Inc.	La Maestra Family Clinic - Fairmont	\$ 696,015	\$ 18,805,516	4%	San Diego	14%
Lifelong Medical Care, Inc.	Over 60 Health Center	\$ 3,617,200	\$ 4,669,386	77%	Alameda	13%
	Big Valley Medical Center	\$ 332,870	\$ 1,351,140	25%	Lassen	13%
Mountain Valley Health Centers (2 sites)	Butte Valley Health Center	\$ 77,815	\$ 945,207	8%	Siskiyou	26%
	East Bay Native American Health Center	\$ 221,764	\$ 9,176,328	2%	Alameda	13%
Native American Health Center, Inc.	Petaluma Health Center	\$ 1,586,296	\$ 13,106,750	12%	Sonoma	17%
Petaluma Health Center	Salud Para La Gente	\$ 292,862	\$ 17,320,583	2%	Santa Cruz	14%
Salud Para La Gente	Southwest Community Health Centers	\$ 366,093	\$ 9,819,609	4%	Sonoma	17%
Santa Rosa Community Health Centers	St. John's Well Child and Family Center ⁴	\$ -	\$ 65,426	0%	Los Angeles	13%
	United Health Centers of SJV - Kerman	\$ 185,171	\$ 5,771,597	3%	Fresno	12%
United Health Center of the San Joaquin Valley (3 sites)	United Health Centers of SJV - Mendota	\$ 90,360	\$ 6,821,288	1%	Fresno	12%
	United Health Centers of SJV - Parlier	\$ 268,644	\$ 7,325,934	4%	Fresno	12%
	Valley Community Clinic	\$ 264,487	\$ 11,474,386	2%	Los Angeles	13%
Valley Health Team, Inc.	San Joaquin Health Center	\$ 221,849	\$ 3,453,096	6%	Fresno	12%
West Oakland Health Council, Inc.	East Oakland Health Center	\$ 76,823	\$ 1,944,272	4%	Alameda	13%

Footnotes:

¹ Data from OSHPD website (http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/PC_SC_Utilization.html). File: 2013 Primary Care Clinic Annual Utilization Report (PCC_Utilization_Pivot13.xlsx). Percentages were calculated from the file data.

² Total column refers to Gross Revenue reported from all payer sources.

³ Beneficiary data from Centers for Medicare & Medicaid Services website (<http://www.cms.gov>): MA State/County Penetration as of January 2013. Percentages calculated by dividing beneficiary data by county population figures from Department of Finance (E-1 County Population Estimates, 2014).

⁴ The St. John's Well Child and Family Center facility was under construction during the 2013 data report year, therefore, gross revenues listed are significantly below normal. Normal operations continue in the 2014 data report year.

Exhibit XV

HOSPITAL LISTING

<u>Facility Name</u>	<u>City</u>
Chinese Hospital	San Francisco
El Centro Regional Medical Center	El Centro
Enloe Medical Center	Chico
Hazel Hawkins Memorial Hospital (San Benito Health Care District)	Hollister
Kern Valley Healthcare District	Mountain Mesa
Lodi Memorial Hospital Association, Inc.	Lodi
Lompoc District Hospital	Lompoc
Marshall Medical Center	Placerville
Mayers Memorial Hospital District	Fall River Mills
Mendocino Coast Health Care District	Fort Bragg
St. Rose Hospital	Hayward

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